



STATE OF MAINE  
*Department of Public Safety*



*Paul R. LePage*  
Governor

*John E. Morris*  
Commissioner

<b>Subject:</b> Procedures for Responding to Discrimination Complaints from Employees and Applicants of the Maine Department of Public Safety’s Sub recipients		<b>Number:</b> DPS 23
<b>Effective Date:</b> December 5, 2011	<b>Rescinds:</b> New	
<b>Reference:</b> <u>Title 5, Chapter 337: HUMAN RIGHTS ACT</u>		
<b>Review Date:</b> Annually		

### **I. Purpose**

The Maine Department of Public Safety ("DPS", "department") receives federal financial assistance and serves as the State Administering Agency (SAA) for many federal grant programs. The purpose of this policy is to establish written procedures for individuals to follow when a complaint alleging employment discrimination is made by an employee or applicant of a DPS sub-recipient implementing federal funding.

### **II. Policy**

All employees and applicants of DPS's sub-recipients shall be treated equally regardless of race, color, national origin, sex, religion, and disability. Sub-recipients are required to comply with all applicable federal laws regarding employment discrimination, including laws that prohibit retaliation, as a condition of implementing federal funding.

Sub-recipients must have procedures in place to respond to discrimination complaints that employees or applicants file directly with the sub-recipient, which may include investigating the complaint internally or forwarding the complaint to the DPS Equal Employment Opportunity Coordinator or the U.S. Equal Employment Opportunity Commission. Sub-recipients must notify DPS grant program managers of the receipt of any such complaints. Grant program managers will inquire about complaint procedures in their compliance checklist for site visits.

### **III. Definitions**

For the purposes of this policy, the terms included in this section are defined as follows, unless otherwise indicated in the policy.

A. Complainant. "Complainant" means a person who initiates a complaint alleging discrimination or retaliation.

B. Equal Employment Opportunity Coordinator. "DPS EEO Complaint Coordinator"

means the DPS Equal Employment Opportunity Complaint Coordinator. Contact information for the current Equal Employment Opportunity Coordinator is listed in Appendix B of this policy.

C. "Retaliation" refers to adverse actions towards an individual engaged in a protected activity, such as opposing a discriminatory practice or participating in a discrimination complaint process.

D. Sub-recipient. "Sub-recipient" means an agency that receives federal grant funding through the department as the State of Maine SSA.

#### **IV. Complaint Procedures**

##### **A. Filing a Complaint**

Any employee or applicant of a DPS sub-recipient may report allegations of employment discrimination with the Equal Employment Opportunity Coordinator.

##### **B. When to Report**

A person who thinks he or she has been subject to employment discrimination should file a complaint alleging such *as soon as possible* after the first date an alleged act of discrimination has occurred and in most cases no later than one hundred eighty (180) calendar days after the last date an alleged act of discrimination has occurred. A person complaining of discrimination by a federally funded sub-recipient must file a complaint within one year from the last act of alleged discrimination or retaliation.

##### **C. How to Report**

Complaints alleging employment discrimination by a sub-recipient must be submitted to the office of the Equal Employment Opportunity Coordinator in writing, using the *DPS Employment Discrimination Complaint* form, which is attached as Appendix A; exceptions to this requirement, however, may be made on a case-by-case basis by the Equal Employment Opportunity Coordinator. In making a complaint, a complainant must disclose the identity of the person or persons alleged to have engaged in discriminatory or retaliatory conduct, and the location, date and a description of each act of alleged discrimination or retaliation.

##### **D. Response**

1. An employee or contractor of the Department of Public Safety other than the Equal Employment Opportunity Coordinator who receives a complaint (in person, over the telephone, or via an e-mail, a letter, or the *DPS Employment Discrimination Complaint* form) that an employee or contractor of a sub-recipient has allegedly engaged in discriminatory or retaliatory conduct shall, as soon as practicable, notify the Equal Employment Opportunity Coordinator, who shall ascertain the details of the complaint for evaluation and assignment. The Equal Employment Opportunity Coordinator will ensure that the complainant completes a *DPS Employment Discrimination Complaint*

- form, if he/she has not already done so.
2. Upon receipt of a complaint, the Equal Employment Opportunity Coordinator shall determine whether the complaint should be investigated, and, if so, by whom. The Equal Employment Opportunity Coordinator may investigate the complaint internally, or may refer the complaint to the U.S. Equal Employment Opportunity Commission or the appropriate state or human rights commission for investigation.
  3. The Equal Employment Opportunity Coordinator shall promptly provide the complainant with a written notice acknowledging receipt of the complaint, and explaining whether the Coordinator has referred the complaint to another agency for investigation. If the complaint is against a sub-recipient implementing funding from the U.S. Department of Justice, the Equal Employment Opportunity Coordinator shall inform the complainant that he/she may also file a complaint with the U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights, at 810 7<sup>th</sup> Street N.W., Washington, DC 20531.
  4. The Equal Employment Opportunity Coordinator shall inform a complainant that it may be impossible to keep the complainant's identity confidential.
  5. Investigations of complaints are to be completed within a reasonable time.
  6. In the event a written report of an investigation is warranted, all information relevant to the complaint that is obtained by an investigator shall be included in the report.
  7. All investigations shall comply with the provisions of the applicable collective bargaining agreement, as well as with any and all applicable provisions of the State of Maine Civil Service Laws

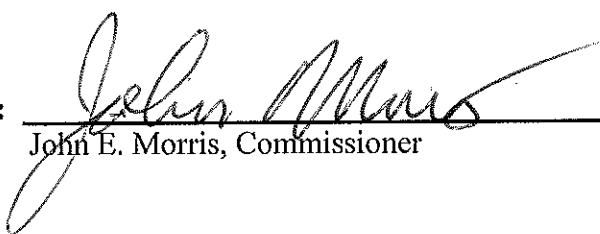
## **V. TRAINING**

The department shall provide periodic training on the procedures set forth in this policy to department employees. This training shall include instruction about the responsibility of employees to refer discrimination complaints to the Equal Employment Opportunity Coordinator. The department shall require the sub-recipient to conduct and document periodic training on the procedures set forth in this policy to sub-recipient employees.

## **VI. POLICY DISSEMINATION**

A copy of this policy shall be made available to all department and sub-recipient employees. A copy of the policy also will be included with orientation materials that are provided to new employees of the department, and will be posted on the department's main website.

Information on the policy will be provided during pre-application conferences and during the sub-recipient orientations and as part of their welcome letter. By signing the contract, the sub-recipient agrees to comply with all applicable federal civil rights laws prohibiting discrimination in employment.

Adopted by:   
John E. Morris, Commissioner

11/15/11  
Date

**WARNING**

This policy is for Department use only and does not apply in any criminal or civil proceeding. The Department policy should not be construed as a creation of higher legal standard of safety or care in an evidentiary sense with respect to third party claims. Violations of this policy will only form the basis for Department administrative sanctions.

## Maine Department of Public Safety Discrimination Complaint Information Form

### 1. Complainant Information:

Name	
Address	
City	
State	
Zip	
Home Phone Number	
Work Phone Number	

### 2. Respondent Information:

Provide name and address of agency involved:

Name	
Address	
City	
State	
Zip	
Telephone Number	

### 3. What is the most convenient time and place for us to contact you about this complaint?

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4. To your best recollection on what date(s) did the discrimination take place?

Date of first occurrence: \_\_\_\_\_

Date of most recent occurrence: \_\_\_\_\_

5. Have you ever attempted to resolve this complaint? ☐ yes ☐ no

6. Explain as briefly and clearly as possible what happened and how you were discriminated against.  
Provide as many specific details as possible. Also attach any written material pertaining to your case.  
(Attach additional sheets if needed)

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7. Basis of Complaint: Which of the following best describes why you believe you were discriminated against: (Check)

☐ Race: Specify \_\_\_\_\_

☐ Color: Specify \_\_\_\_\_

☐ Religion: Specify \_\_\_\_\_

☐ National Origin: Specify \_\_\_\_\_

☐ Sex: Specify ☐ Male ☐ Female

☐ Age: Specify Date of Birth: \_\_\_\_\_

☐ Disability: Specify \_\_\_\_\_

☐ Political Affiliation: Specify \_\_\_\_\_

☐ Citizenship: Specify \_\_\_\_\_

☐ Reprisal/Retaliation: Specify \_\_\_\_\_

☐ Other: Specify \_\_\_\_\_

11. What other information do you think is relevant to this situation?

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12. If this complaint is resolved to your satisfaction, what remedies do you seek?

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13. Please list below any persons (witnesses, fellow employees, supervisors, or others) that we may contact for additional information to support or clarify your complaint:

<hr/> Name	<hr/> Address	<hr/> Telephone Number
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14. Do you have an attorney? ☐ Yes ☐ No

If yes, please provide name, address and phone:

<hr/> Attorney Name	<hr/> Address	<hr/> Telephone Number
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15. Have you filed a case or complaint with any of the following?

- ☐ Civil Rights Division, U.S. Dept of Justice
- ☐ Office of Civil Rights, Office of Justice Programs, U. S. Department of Justice
- ☐ U.S. Equal Employment Opportunity Commission
- ☐ Federal or State Court
- ☐ Your State of local Human Relations/Rights Commission

16. For each item checked in #15 above, please provide the following information:

Agency:  
Data Filed:  
Case or Docket Number:  
Date of Trial or Hearing:  
Location of agency or court:  
Name of Investigator:  
Status of Case:  
Comments:

17. Sign (Complaint NOT VALID unless signed)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date



**MAINE DEPARTMENT OF PUBLIC SAFETY  
EEO COMPLAINT COORDINATOR CONTACT INFORMATION**

The current Equal Employment Opportunity Coordinator is Michaela Loisel of the Department of Administrative & Financial Services, Security & Employment Service Center.

▪ **Mailing address:**

Department of Administrative & Financial Services, Security & Employment Service Center

*Attn:* Ms. Michaela Loisel, Equal Employment Opportunity Coordinator

45 Commerce Dr., Suite 4

Augusta, ME 04333-0108

- **Office telephone number:** 207.623.6735
- **E-mail address:** [michaela.t.loisel@maine.gov](mailto:michaela.t.loisel@maine.gov)